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PTO/SB/05 (03-01)  
Approved for use through 10/31/2002. OMB 0651-0032  
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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		<b>Attorney Docket No.</b> LA-826-212/09705959	
		<b>First Inventor</b> Johnson N. S. Wong	
		<b>Title</b> TAMPER EVIDENT VIAL CAP AND INTEGRITY ASSURANCE METHOD	
		<b>Express Mail Label No.</b> EV 323595589US	

<b>APPLICATION ELEMENTS</b>		<b>ADDRESS TO:</b> Box Patent Application Commissioner for Patents Washington, DC 20231	
<small>See MPEP chapter 600 concerning utility patent application contents.</small>			
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small></p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification <span style="float: right;">[Total Pages <b>14</b>]</span> <small>(preferred arrangement set forth below)</small> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R &amp; D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <span style="float: right;">[Total Sheets <b>7</b>]</span></p> <p>5. Oath or Declaration <span style="float: right;">[Total Pages <b>3</b>]</span> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small> i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>	<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i></p> <p>8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies</p>		

<b>ACCOMPANYING APPLICATIONS PARTS</b>	
<p>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small></p> <p>11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i></p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small></p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input checked="" type="checkbox"/> Other: <span style="border: 1px solid black; padding: 2px;">Information Disclosure Statement</span></p>	

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_


Prior application information: Examiner \_\_\_\_\_ Group / Art Unit: \_\_\_\_\_

**For CONTINUATION or DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

<b>19. CORRESPONDENCE ADDRESS</b>					
<input type="checkbox"/> Customer Number or Bar Code Label			or <input checked="" type="checkbox"/> Correspondence address below		
Name	FULBRIGHT & JAWORSKI L.L.P. Robert Berliner				
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City	Los Angeles	State	CA	Zip Code	90017-2571
Country	US	Telephone	(213) 892-9200	Fax	(213) 680-4518

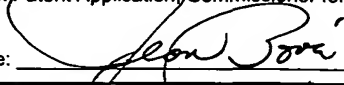
  

Name (Print/Type)	Robert Berliner	Registration No. (Attorney/Agent)	20,121
Signature		Date	July 29, 2003

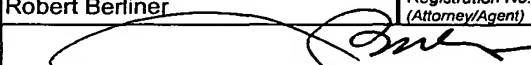
  

**Transmittal-New Utility Patent Application**

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV323595589US, in an envelope addressed to: Box Patent Application, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22314-1450, on the date shown below.

Dated: July 29, 2003 Signature:  (Jean Bove')

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<b>FEE TRANSMITTAL</b> <b>for FY 2003</b> <small>Patent fees are subject to annual revision.</small>		<b>Complete if Known</b>																																																																																																																																																																																															
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<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 50-0337 Deposit Account Name: Fulbright & Jaworski L.L.P. The Commissioner is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		<b>3. ADDITIONAL FEES</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>410</td><td>2252</td><td>205</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>930</td><td>2253</td><td>465</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,450</td><td>2254</td><td>725</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>1,970</td><td>2255</td><td>985</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - 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1201	84	2201	42	Independent claims in excess of 3																																																																																																																																																																																													
1203	280	2203	140	Multiple dependent claim, if not paid																																																																																																																																																																																													
1204	84	2204	42	** Reissue independent claims over original patent																																																																																																																																																																																													
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent																																																																																																																																																																																													
<b>SUBTOTAL (2)</b> (\$)					279.00																																																																																																																																																																																												
<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>																																																																																																																																																																																															
Name (Print/Type)	Robert Berliner	Registration No. (Attorney/Agent)	20,121																																																																																																																																																																																														
Signature		Telephone	(213) 892-9237																																																																																																																																																																																														
		Date	July 29, 2003																																																																																																																																																																																														

## Fee Transmittal

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV323595589US, in an envelope addressed to: Commissioner for Patents, P. O. BOX 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: July 29, 2003

Signature:

(Jean Bove)